

**PATHFINDER REGIONAL VOCATIONAL-TECHNICAL HIGH SCHOOL DISTRICT**

240 Sykes Street (Route 181), Palmer, MA 01069-1225

Phone: [413] 283-9701 - FAX: [413] 284-0032 - Web: [www.pathfindertech.org](http://www.pathfindertech.org)

Applying for Grade:.....

.....

(Print) Name of Applicant:.....

**INSTRUCTIONS TO APPLICANT:**

- 1. Page 1 must be completed by applicant. It is important that all information be given. **Please PRINT clearly.**
- 2. Page 2 (on the reverse side of this application) must be completed by your counselor/principal at the school you now attend.

**IDENTIFYING INFORMATION:** (Please PRINT clearly)

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Name: Last Name First Name Full Middle Name (required) Sex

.....

Place of Birth: Town (required) State Date of Birth **SASID # \_\_\_\_\_ (Required)**  
▶ get this 10-digit number from your Counselor

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Residence: No. Street Town State Zip Code Phone: [Area Code] - Phone Number

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Mailing Address: (if different than above, such as P.O. Box No., Town, Zip Code) Alternate Phone: [Area Code] - Phone Number

.....

Name of responsible person(s) with whom student resides.  Both Parents  Mother  Father  
 Brother/Sister  Aunt/Uncle

.....

Parent/Guardian Email Address  Grandparent  Other  
 Foster Parent/Guardian

.....

Town of Residence School you currently attend Town Grade you are applying for Sept. 20.....  
School year beginning:

**SHOPS:** Please number ALL shops in order of preference--start with "1" for your first choice and end with "14" as your last choice.

- ..... Collision Repair    ..... Machine    ..... Horticulture    ..... Cosmetology    ..... HVAC-R (Heat, Vent, A/C & Refr)
- ..... Automotive Tech    ..... Electronics    ..... Health Assisting    ..... Business Technology    .....CAD (Computer-Aided Drafting)
- ..... Carpentry    ..... Electrician    ..... Food Management    ..... Programming & Web Design

**HEALTH:** Vocational schools duplicate an industrial setting. It is important that we know whether you have a history of allergic reactions which could be triggered by exposure to certain substances or environments. This information will not be used for admission purposes. Do you have a history of allergic reactions?  YES  NO

▶ If YES, please explain: .....

**RECORDS RELEASE:** I approve submission of this application and authorize the Guidance/Principal's Office to forward this application and any requested school records to Pathfinder Regional Vocational-Technical High School.

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Date Signature of Applicant Signature of Parent/Guardian

**YOUR GUIDANCE COUNSELOR OR PRINCIPAL MUST COMPLETE PAGE 2 BEFORE MAILING**

**Belchertown – Granby – Hardwick – Monson – New Braintree – Oakham – Palmer – Ware – Warren**

Pathfinder RVTHS insures equal education opportunity regardless of age, race, color, religion, national origin, disability, sex or sexual orientation.

Accredited by New England Association of Schools and Colleges

